

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # F05000001578

1. Entity Name

PIPER LOGISTICS, INC.



Principal Place of Business

7138 ROYAL OAKLAND DRIVE
INDIANAPOLIS IN 46236

Mailing Address

8175 ALLISON AVENUE
INDIANAPOLIS IN 46268



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E034 (10/07)

4. FEI Number

30-0037638

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PIPER, TIM
4770 DISTRIBUTION DRIVE
TAMPA FL 33605

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Timothy M. Pifer

4-28-08

Signature, typed or printed name of registered agent and title (if applicable).

(NOTE: Registered Agent signature required when relocating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CDP ☐ Delete
NAME PIPER, GREGORY J
STREET ADDRESS 7138 ROYAL OAKLAND DRIVE
CITY-ST-ZIP INDIANAPOLIS IN 46236

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 000000939415
CITY-ST-ZIP 05/28/08-80028-003 150.00

TITLE DCST ☐ Delete
NAME PIPER, TIMOTHY M
STREET ADDRESS 5340 CULVER LANE
CITY-ST-ZIP GREENWOOD IN 46142

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME PIPER, FRANCIS R SR.
STREET ADDRESS 6164 AFTON CXREST
CITY-ST-ZIP INDIANAPOLIS IN 46220

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME PIPER, JOSEPH
STREET ADDRESS 10514 CAMILLE COURT
CITY-ST-ZIP INDIANAPOLIS IN 46268

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Timothy M. Pifer

4-28-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Print the Name